

Express Mail No.: EL988724641US

Date Deposited: 09/25/2003

Approved for use through 10/31/2002. PTO/SB/06 (08-00)  
 U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

8403.805

## CLAIMS AS FILED - PART I

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	68	minus 20 = * 48
INDEPENDENT CLAIMS (37 CFR 1.16(b))	5	minus 3 = * 2
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		0

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

RATE	FEE
	\$ 0
x \$ 9 =	0
x 42 =	0
+ 140 =	0
TOTAL	0

RATE	FEE
	\$ 0
x \$ 18 =	864
x 84 =	168
+ 280 =	0
TOTAL	1032

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	*	Minus ** 20	= 0
Independent (37 CFR 1.16(b))	*	Minus *** 3	= 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

RATE	ADDI- TIONAL FEE
x \$ 9 =	0
x 42 =	0
+ 140 =	0
TOTAL ADDIT. FEE	0

RATE	ADDI- TIONAL FEE
x \$ 18 =	0
x 84 =	0
+ 280 =	0
TOTAL ADDIT. FEE	0

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	*	Minus **	=
Independent (37 CFR 1.16(b))	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

TOTAL  
ADDIT. FEETOTAL  
ADDIT. FEE

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	*	Minus **	=
Independent (37 CFR 1.16(b))	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

TOTAL  
ADDIT. FEETOTAL  
ADDIT. FEE

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SEND TO:

Mail Stop Patent Application  
 Commissioner For Patents, PO Box 1450  
 Alexandria, VA 22313-1450